

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

Westly Battler
13828 Costle Blvd #203
Silver Spring MD. 20904

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Montgomery County Maryland
161 Monroe St.
Rockville MD.

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Complaint for a Civil Case

Case No. 21-cv-1107-GLS
(to be filled in by the Clerk's Office)

Jury Trial: ☐ Yes ☐ No
(check one)

FILED
U.S. DISTRICT COURT
DISTRICT OF MARYLAND
2021 MAY -6 P 12:12
CLERK'S OFFICE
AT GAITHERSBURG
BY

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Westly Balthrop</u>
Street Address	<u>13878 Castle Blvd # 203</u>
City and County	<u>Silver Spring</u>
State and Zip Code	<u>Maryland 20904</u>
Telephone Number	<u>240-350-5710</u>
E-mail Address	<u>Westlybalthrop.wb@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Montgomery County</u>
Job or Title (if known)	<u></u>
Street Address	<u>101 Monroe St</u>
City and County	<u>Rockville Maryland</u>
State and Zip Code	<u>Maryland 20850</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

Defendant No. 2

Name _____
Job or Title _____
(if known) _____
Street Address _____
City and County _____
State and Zip Code _____
Telephone Number _____
E-mail Address _____
(if known) _____

Defendant No. 3

Name _____
Job or Title _____
(if known) _____
Street Address _____
City and County _____
State and Zip Code _____
Telephone Number _____
E-mail Address _____
(if known) _____

Defendant No. 4

Name _____
Job or Title _____
(if known) _____
Street Address _____
City and County _____
State and Zip Code _____
Telephone Number _____
E-mail Address _____
(if known) _____

(If there are more than four defendants, attach an additional page providing the same information for each additional defendant.)

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*

☐ Federal question

☐ Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

EEOC Disability

B. If the Basis for Jurisdiction Is Diversity of Citizenship

1. The Plaintiff(s)

a. If the plaintiff is an individual

The plaintiff, (name) Westly Bafford, is a citizen of the State of (name) Maryland.

b. If the plaintiff is a corporation

The plaintiff, (name) Montgomery County, is incorporated under the laws of the State of (name) Maryland, and has its principal place of business in the State of (name) Montgomery County.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)

a. If the defendant is an individual

The defendant, (name) Westco, is a citizen of the State of (name) _____. Or is a citizen of (foreign nation) _____.

b. If the defendant is a corporation

The defendant, (name) _____, is incorporated under the laws of the State of (name) _____, and has its principal place of business in the State of (name) _____. Or is incorporated under the laws of (foreign nation) _____, and has its principal place of business in (name) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

March 2018 Diagnosed with a hip impalement.
 November 2018 Diagnosed with Bilateral Aseptic Vascular Necrosis / Hip Degeneration.
 March 2019 Fired from, removed, forced out, light duty post.
 April 2019 Offered a reclassification to a Liquor Store clerk. And on condition of employment.
 Reclassified from DLG / ABS Truck Driver to Liquor Store Clerk.
 May 6th Hip Total Right Hip Replacement.
 May 24th Was Dismissed from Montgomery County DLG.
 (1) Reinstated on out service disability T.I. released from medical duty.
 July 2019 told was put on disability Permanent.
 Out Service. I was told by Core Work Retirement Division.
 To write a email to Retirement to tell them taking the reclassification not Permanent disability.
 Disability went in anyway. The disability check less than half what I was earning as a County Truck Driver.
 4/7/20 Contacted EEOC. Charges of Discrimination against Montgomery County.
 12/2020 Contacted Laura Hylton Stinson.
 1/21 Contacted EEOC again. Charge of Disability discrimination.
 11/20 Took a physical for OMS Montgomery County.
 4/21 Letter Montgomery County will not Accommodate my Disability.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. For any request for injunctive relief, explain why monetary damages at a later time would not adequately compensate you for the injuries you sustained, are sustaining, or will sustain as a result of the events described above, or why such compensation could not be measured.

Due to Montgomery County not recognising my reclassification?
I am working 80 hrs a week on a job that was part time.
It has now become full time and then some. I am not able
to contain any other good job! County State, because of
Montgomery County.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 5/6/21, 2021.

Signature of Plaintiff

Printed Name of Plaintiff

Wesley Balthazar
Wesley Balthazar

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address